	FORM EXEMPT UNDER 44 U.S.C 35
-	MIDITE IN THIS SPACE

Date Filed //1/17/07

INSTRUC	CTIONS:
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Case

6-CA-35462

Name of Employer	AGAINST WHOM CHARGE IS BROU	
USY BEAVER BUILDING CENTER		b. Number of workers employed
Address (Street, city, state, and ZIP code) 93 Springs Drive Veirton WV 26062-	d. Employer Representative Jim Temple	e. Telephone No. (740)723-7222 Fax No.
Type of Establishment(factory, mine, wholesaler, etc.)	Store Manager g. Identify principal product or service hardware and such	() -
h. The above-named employer has engaged in and is engand (list subsections) (3) and these unfair labor practices are practices affecting.	aging in unfair labor practices within the mea	ning of section 8(a), subsections (1) of the National Labor Relations Act,
Basis of the Charge (set forth a clear and concise statement to the Charge (set forth a clear and concise statement) and the Charge (set forth a clear and concise st	기내스 교육 이 이 시작으로 이 기술을 하고 이 경기를 하나가 보다 귀하고 하나가 되다.	
By the above and other acts, the above-named employer is Section 7 of the Act.	and the second s	
Section 7 of the Act. Full name of party filing charge (if labor organization, give (6), (b) (7)(C)	and the second s)
	and the second s	4b. Telephone No. (b) (6), (b) (7)(C) Fax No.
Section 7 of the Act. Full name of party filing charge (if labor organization, give 16, (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C)	e full name, including local name and numbe	4b. Telephone No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)
Section 7 of the Act. Full name of party filing charge (if labor organization, give 16, (b) (7)(c) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization of	of ull name, including local name and number	4b. Telephone No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)
Section 7 of the Act. Full name of party filing charge (if labor organization, give 1)(6),(b)(7)(G) a. Address (Street and number, city, state, and ZIP code)	of which it is an affiliate or constituent unit (to 6. DECLARATION e and that the statements are true to the	4b. Telephone No. (b) (6), (b) (7)(C) Eax No. (b) (6), (b) (7)(C) be filled in when charge is filed by a labor

UNITED STATE AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C 3512 WRITE IN THIS SPACE

Date Filed

1-18-07

11 6-CA-35463

IAIC 1		-		
INST	ı Kı		ш	V 50 :

Name of Employer ID Net Solutions		GHT
		b. Number of workers employed 35
Address (Street, city, state, and ZIP code)	d. Employer Representative	e. Telephone No.
Center Avenue	Rich	(412)939-0303
ittsburgh PA 15229-	Rosenzweig	Fax No.
usbuigh FA 13229-	Owner	() -
Type of Establishment(factory, mine, wholesaler, etc.) ffice	g. Identify principal product or service Call Center	
h. The above-named employer has engaged in and is engand (list subsections) and these unfair labor practices are practices affecting		aning of section 8(a), subsections (1) of the National Labor Relations Act,
Basis of the Charge (set forth a clear and concise statem		labor practices)
On or about (b) (6), (b) (7)(C) 2006, the representatives terminated the employened and other mutual aid and protection times since said date and for the aforefuse, to employ the above-named	loyment of (b) (6), (b) (7)(C) because of said employer for the purant in order to discourage said or resaid reasons, the said employer	cause engaged in rpose of collective bargaining concerted activities. At all
By the above and other acts, the above-named employer! Section 7 of the Act.	has Interfered with, restrained, and coerced em	ployees in the exercise of the rights guaranteed i
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C)		7
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code)		
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C)		4b. Telephone No. (b) (6), (b) (7)(C)
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code)		4b. Telephone No.
Section 7 of the Act. Full name of party filing charge (if labor organization, given) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) Full name of national or international labor organization organization)	e full name, including local name and numbe	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - be filled in when charge is filed by a labor

UNITED STATES AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

9	- 4,	FORM EXEMPT UNDER 44 U.S.C 3512
Jeo	Ce DOOL	WRITE IN THIS SPACE
50	Case 6-CA-35477 Bu	Date Filed C 3

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged

1. EMPLOYE	R AGAINST WHOM CHARGE IS BROU	
. Name of Employer tramark/Servicemaster		b. Number of workers employed Appr. 40
Address (Street, city, state, and ZIP code)	d. Employer Representative Mark J.	e. Telephone No. (412)586-9497
fittsburgh PA 15213-	Berta Director	Fax No.
Type of Establishment (factory, mine, wholesaler, etc.) ousekeepers Services	g. Identify principal product or service Housekeeping Services	
h. The above-named employer has engaged in and is en and (list subsections) (3)		aning of section 8(a), subsections (1) of the National Labor Relations Act,
and these unfair labor practices are practices affecting Basis of the Charge (set forth a clear and concise statem		ALC D. A. C.
On or about (b) (6), (b) (7)(C) 2007, the a representatives terminated the empl	loyment of,(b) (6), (b) (7)(C), becau	
because engaged in concerted a of collective bargaining and other membership in said labor organization the said employer has refused, and	oyees International Union, Local octivities with other employees of utual aid and protection and in or on. At all times since said date, does now refuse to employ the a	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, bove-named employee.
because engaged in concerted a of collective bargaining and other membership in said labor organization the said employer has refused, and By the above and other acts, the above-named employer Section 7 of the Act. Full name of party filing charge (if labor organization, gives	oyees International Union, Local activities with other employees of utual aid and protection and in or on. At all times since said date, does now refuse to employ the a	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, bove-named employee.
because engaged in concerted a of collective bargaining and other membership in said labor organization, the said employer has refused, and By the above and other acts, the above-named employer Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6). (b) (7)(C)	oyees International Union, Local activities with other employees of utual aid and protection and in or on. At all times since said date, does now refuse to employ the a	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, bove-named employee. ployees in the exercise of the rights guaranteed in the control of the control of the rights guaranteed in the rights guaranteed guaranteed guaranteed guaranteed guar
because engaged in concerted a of collective bargaining and other membership in said labor organization, the said employer has refused, and By the above and other acts, the above-named employer Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (6), (b) (7)(C)	oyees International Union, Local activities with other employees of utual aid and protection and in or on. At all times since said date, does now refuse to employ the a	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, bove-named employee. ployees in the exercise of the rights guaranteed in the discourage and the exercise of the rights guaranteed in the exercise of the rights guaranteed guarant
because engaged in concerted a of collective bargaining and other membership in said labor organization the said employer has refused, and By the above and other acts, the above-named employer Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) b) (6), (b) (7)(C) 5. Full name of national or international labor organization	oyees International Union, Local activities with other employees of utual aid and protection and in or on. At all times since said date, a does now refuse to employ the activities with, restrained, and coerced employ the full name, including local name and number of which it is an affiliate or constituent unit (to	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, above-named employee. ployees in the exercise of the rights guaranteed in (b) (6), (b) (7)(C) Fax No. () -
because engaged in concerted a of collective bargaining and other membership in said labor organization the said employer has refused, and	original Union, Local	1199F, a labor organization, said employer for the purpose der to discourage and for the aforesaid reasons, above-named employee. ployees in the exercise of the rights guaranteed in ployees in the exercise of the rights guaranteed in (b) (6), (b) (7)(c) Fax No. () - The filled in when charge is filed by a labor

FORM NERB-501

UNITED STATE OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case

6-CA-35481

FORM EXEMPT UNDER 44 U.S.C 3512

IOT WRITE IN THIS SPACE

Date Filed // 1-30-07

INST	RUC	TION	VS:

	R AGAINST WHOM CHARGE IS BROL	
Name of Employer. and S Packaging Products, Inc.		b. Number of workers employed 20
Address (Street, city, state, and ZIP code)	d. Employer Representative	e. Telephone No.
0549 Crosby Circle	Mark	(814)756-3926
ranesville PA 16410-	Stuart	Fax No.
	General Manager	().
Type of Establishment (factory, mine, wholesaler, etc.) actory	g. Identify principal product or service Packaging Products	
h. The above-named employer has engaged in and is eng and (list subsections)		eaning of section 8(a), subsections (1) of the National Labor Relations Act.
and these unfair labor practices are practices affecting Basis of the Charge (set forth a clear and concise stateme		
employ the above-named employee.		
By the above and other acts, the above-named employer h Section 7 of the Act.	nas interfered with, restrained, and coerced em	ployees in the exercise of the rights guaranteed
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6), (b) (7)(C)		
Section 7 of the Act. Full name of party filing charge (if labor organization, give) (6). (b) (7)(C) a. Address (Street and number, city, state, and ZIP code)		90
Section 7 of the Act. Full name of party filing charge (if labor organization, give (i6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (6), (b) (7)(C)		4b. Telephone No.
Section 7 of the Act. Full name of party filing charge (if labor organization, give (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (6), (b) (7)(C)		4b. Telephone No. (b) (6), (b) (7)(C)
Section 7 of the Act. Full name of party filing charge (if labor organization, give (if labor organization, give (if labor organization), give (if labor organization, give (if labor organiz	of which it is an affiliate or constituent unit (to	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - be filled in when charge is filed by a labor
Section 7 of the Act. Full name of party filing charge (if labor organization, give (if) (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (6), (b) (7)(C) (6), (b) (7)(C) Full name of national or international labor organization of	of which it is an affiliate or constituent unit (to	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - be filled in when charge is filed by a labor e best of my knowledge and belief. an Individual (Print/type name and title or office, if a

UNITED STATE AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case 6

DO NOT WRITE IN THIS SPACE

Date Filed

6-CA-35604 // 5-18-07

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

a. Name of Employer			AGAINST WHOM CHARGE IS BRO	b. Number of workers employed
he Salvation Army Thrift	Store			16
. Address (Street, city, state	e, and ZIP code,)	d. Employer Representative	e. Telephone No.
025 Eisenhower Blvd.	The state of the s		Jackie	(814)266-1679
ohnstown	PA	15904-	Kauffman Manager	Fax No.
Type of Establishment (face etail outlet	ctory, mine, whol	lesaler, etc.)	g. Identify principal product or servic used clothing and household items	
and (list subsections)			aging in unfair labor practices within the m	neaning of section 8(a), subsections (1) of the National Labor Relations Act,
			commerce within the meaning of the Act.	2.4 7.40.0000 0.0000 0.40
Basis of the Charge (set I	forth a clear and	concise stateme	ent of the facts constituting the alleged unf	air labor practices)
Section 7 of the Act. Full name of party filing c			as interfered with, restrained, and coerced en	
Section 7 of the Act. 3. Full name of party filing co. b) (6), (b) (7)(C) 4a. Address (Street and num	harge (if labor oi	rganization, give		er) 4b. Telephone No.
Section 7 of the Act. Full name of party filing cool (6), (b) (7)(C) a. Address (Street and num	harge (if labor oi	rganization, give		4b. Telephone No. (b) (6), (b) (7)(C)
Section 7 of the Act. Full name of party filing co. (6), (b) (7)(C) a. Address (Street and number of (6), (b) (7)(C)	harge (if labor oi	rganization, give		4b. Telephone No.
Section 7 of the Act. 5. Full name of party filing cool (6), (b) (7)(C) 6. Address (Street and number (6), (b), (7)(C) 6. Full name of national or in	harge (if labor or	rganization, give and ZIP code)	full name, including local name and numb	4b. Telephone No, (b) (6), (b) (7)(C) Fax No.
Section 7 of the Act. 3. Full name of party filing of b) (6), (b) (7)(C) 4a. Address (Street and numb) (6), (b) (7)(C) 5) (6), (b) (7)(C)	harge (if labor or nber, city, state, s	rganization, give and ZIP code) or organization of	full name, including local name and numb	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - to be filled in when charge is filed by a labor
Section 7 of the Act. Full name of party filing cool (6), (b) (7)(C) a. Address (Street and number (6), (b), (7)(C) (6), (b), (7)(C) Full name of national or in	harge (if labor or nber, city, state, s	and ZIP code) or organization of	full name, including local name and numb f which it is an affiliate or constituent unit (6. DECLARATION and that the statements are true to the	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - to be filled in when charge is filed by a labor ne best of my knowledge and belief. An Individual (Print/type name and title or office, if any

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

0,0	CONOTWI	FORM EXEMPT UNDER 44 U.S.C 3512	
X	Case 6-CA-35618	Date Filed / / 6-4-07	

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged

1, EMPLOYER	AGAINST WHOM CHARGE IS BROU	GHT
a. Name of Employer Crabtree & Evelyn		b. Number of workers employed six
c. Address (Street, city, state, and ZIP code) 145 Mall Circle Boulevard #A5 Monroeville PA 15146-	d. Employer Representative Laurie McMorrow District Manager	e. Telephone No. (412)373-0941 Fax No.
f. Type of Establishment (factory, mine, wholesaler, etc.) retail store	g. Identify principal product or service beauty products	
h. The above-named employer has engaged in and is eng and (list subsections) and these unfair labor practices are practices affecting		aning of section 8(a), subsections (1) of the National Labor Relations Act,
purpose of collective bargaining and other mactivities. At all times since said date and for now refuse, to employ the above-named employer has been above and other acts, the above-named employer has section 7 of the Act.	r the aforesaid reasons, the said	employer has refused, and does
3. Full name of party filing charge (if labor organization, give (b) (6), (b) (7)(C)	full name, including local name and number,	
4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	(B)(6).	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () -
Full name of national or international labor organization of organization)	which it is an affiliate or constituent unit (to	be filled in when charge is filed by a labor
(b) (6), (b) $(7)(C)_{erge}$	6. DECLARATION and that the statements are true to the	best of my knowledge and belief.

UNITED STATES OF AMERICA

NATIONAL LABOR RELATIONS BOARD &

e,	200	400	S	35
00	DO NOT WRITE IN THIS SPACE			
K	Case		Date Filed	
1	6-CA	A-35633	6-12-07	

INSTRUCTIONS:

	GAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer	***	b. Number of workers employed
Casalinova Investigations, Inc.		9
Address (street, city, state, ZIP code) 4624 South Medina Line Road Norton, OH 44203	d Employer Representative Mark L. Casalinova, Pres.	e. Telephone No. 1-888-850-3473
Type of Establishment (lactory, mine, wholesaler, etc.) Fire Investigations Firm	g. Identify principal product or service Fire Investigations	4
The above-named employer has engaged in and is engaged and (list subsections)(3)		ting of section 8(a), subsections (1) of the National Labor Relations Act,
and these unfair labor practices are unfair practices affect. Basis of the Charge (set forth a clear and concise stateme		or prostings t
protected activity with other emplaid and protection.		
By the above and other acts, the above-named employerights guaranteed in Section 7 of the Act		employees in the exercise of the
rights guaranteed in Section 7 of the Act		employees in the exercise of the
rights guaranteed in Section 7 of the Act Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C) a. Address (street and number, city, state, and ZIP code)	re full name, including local name and number)	employees in the exercise of the
rights guaranteed in Section 7 of the Act Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C)	re full name, including local name and number)	
(b) (6), (b) (7)(C) a. Address (street and number, city, state, and ZIP code)	n of which it is an affiliate or constituent unit	b. Telephone No. (b) (6), (b) (7)(C) (to be filled in when charge is filed

INTERNET
FORM NLRB-501
44.00

UNITED STEES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

6-CA-35641

-	FORM EXEMPT UNDER 44 U.S.C. 351		
	DO NOT WRITE IN THIS SPACE		
	Date Filed		

6-21-07

INSTRUCTIONS

occurred or is occurring.	No Regional Director for the region in	which the alleged diffall labor practice
1. EMPLOY	FER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Bidmall, Inc.		b. Number of Workers Employed 15
c. Address (street, city, State, ZIP, Code) 5001 Baum Boulevard, Pittsburgh, PA 15213-	d. Employer Representative Jun Wang	e. Telephone No. (412) 621-1180 Fax No. (412) 621-1186
f. Type of Establishment (factory, mine, wholesaler, etc.) Internet Company	g. Identify Principal Product or Service Sell items on Ebay	1.12.02.1100
The above-named employer has engaged in and is engaging subsections) practices are unfair practices affecting commerce within the	of the National L	ection 8(a), subsections (1) and (list abor Relations Act, and these unfair labor
said employer for the purpose of collective bargaining activities. At all times since said date and for the afores (b) (0), (b) (7)(0)	and other mutual aid and protection and in	concerted activities with other employees of a order to discourage said concerted and does now refuse to employ
By the above and other acts, the above-named employer guaranteed in Section 7 of the Act.	has interfered with, restrained, and coerced e	employees in the exercise of the rights
Full name of party filing charge (if labor organization, give full (b) (6), (b) (7)(C)	name, including local name and number)	
4a. Address (street and number, city, State, and ZIP Code) (b)(6),(b)(7)(C)		4b. Telephone No. (b) (6), (b) (7)(C) Fax No.
5. Full name of national or international labor organization of wh	nich it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)
(b) (6), (b) (7)(C)	DECLARATION and that the statements are true to the best an Indi	vidual
Address Address	(b) (6),	(b) (7)(C) 6/19/207

(b) (6), (b) (7)(C)

UNITED STATES NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

-	FORM EXEMPT UNDER 44 U.S.C 351
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INSTRUCTIONS:

Case Date Filed 6-CA-35675 7/20/07

Name of Employer	1. EMPLOYER	R AGAINST WHOM CHARGE IS BROUG	GHT
Owens Illinois Closure, In	c.		b. Number of workers employed 300
c. Address (Street, city, sta 2890 Maplevale Road	ate, and ZIP code)	d. Employer Representative Mike	e. Telephone No. (814)849-4233
Brookville	PA 15825-	Rajecki Plant Manager	Fax No.
Type of Establishment (fa	actory, mine, wholesaler, etc.)	g. Identify principal product or service Lids	10.2
and (list subsections)		aging in unfair labor practices within the mea	ning of section 8(a), subsections (1) of the National Labor Relations Act,
the said emp		loes now refuse, to employ the a	bove framed employee.
Section 7 of the Act.		as interfered with, restrained, and coerced empl	W 10 W G 111 (10 10 10 10 10 10 10 10 10 10 10 10 10 1
Section 7 of the Act. 3. Full name of party filing			
Section 7 of the Act. 3. Full name of party filing b) (6), (b) (7)(C) 4a. Address (Street and nu			W 10 W G 111 (10 10 10 10 10 10 10 10 10 10 10 10 10 1
Section 7 of the Act. 3. Full name of party filing (b) (6), (b) (7)(C)	charge (if labor organization, give		4b. Telephone No. (b) (6), (b) (7)(C) Fax No.
Section 7 of the Act. 3. Full name of party filing b) (6), (b) (7)(C) 4a. Address (Street and number of the Act.) (b) (6), (b) (7)(C)	charge (if labor organization, give		4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () -

(Telephone No.)

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FORM NLRB-501 (6-07) UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER Dee

FORM EXEMPT UNDER 44 U.S.C.3512

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
6-CA-35729	8-31-07			

INSTRU	r	
INO INC		43 .

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER	AGAINST WHOM CHARGE IS BROUG	
Name of Employer Izzo Designs	b. Number of workers employed	
Address (Street, city, state, and ZIP code) Mailing: 3544 South Meadowlark Ave. Springfield MO 65807 Job Site: 300 S. Hills Village, Upper St. Clair PA	d. Employer Representative Gregory Mace	e. Telephone No. 417-234-3194 Fax No.
Type of Establishment (factory, mine, wholesaler, etc.) Retail Store	g. Identify principal product or service Sunglasses	
The above-named employer has engaged in and is engaged and (list subsections) 8(a)(1) unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal F	ithin the meaning of the Act, or these unfa	of the National Labor Relations Act, and thes
Basis of the Charge (set forth a clear and concise statement	t of the facts constituting the alleged unfai	r labor practices)
Full name of party filing charge (if labor organization, give for (b) (6), (b) (7)(C)	ull name, including local name and numbe	n
(b) (6), (b) (7)(C)	ull name, including local name and numbe	4b. Telephone No. (b) (6), (b) (7)(C) Fax No.
(b) (6), (b) (7)(C) Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Full name of national or international labor organization of v		4b. Telephone No. (b) (6), (b) (7)(C) Fax No.
a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Full name of national or international labor organization of virganization) I declare that I have read the above charge a	which it is an affiliate or constituent unit (to	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. be filled in when charge is filed by a labor be best of my knowledge and belief. an Individual
(b) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Full name of national or international labor organization of virganization) I declare that I have read the above charge a	which it is an affiliate or constituent unit (to	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. be filled in when charge is filed by a labor be best of my knowledge and belief.

INTERNET FORM NLRB-501 (6-07)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

recipied DO NO.

FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE

6-CA-35746

Date Filed 9-19-07

07

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

Name of Employer	R AGAINST WHOM CHARGE IS BROUGHT	\\	
Name of Employer Vincentian Home		b. Number of workers employed 200	
Address (Street, city, state, and ZIP code) 111 Perrmont Road Pittsburgh, PA 15237	d. Employer Representative Beth Bennett	e. Telephone No. 412/366-5600 Fax No.	
Type of Establishment (factory, mine, wholesaler, etc.) Nursing Home	g. Identify principal product or service Patient Housing and Care		
The above-named employer has engaged in and is engaged (list subsections) unfair labor practices are practices affecting commerce commerce within the meaning of the Act and the Postal	within the meaning of the Act, or these unfair	of the National Labor Relations Act, and these	
		2	
Full name of party filing charge (if labor organization, give	full name, including local name and number)		
(b) (6), (b) (7)(C)	full name, including local name and number)	4b. Telephone No. (b) (6), (b) (7)(C) Fax No.	
(b) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) b. Full name of national or international labor organization of		(b) (6), (b) (7)(C) Fax No.	
(a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of organization)		(b) (6), (b) (7)(C) Fax No e filled in when charge is filed by a labor	

Warred Voca

INTERNET FORM NLRB-501 (6-07)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case

FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE		
	Date Filed	T
-35777	10-15-07	

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged

4	ER AGAINST WHOM CHARGE IS BROUGHT		
Name of Employer Magee-Womens Hospital/UPMC		b. Number of workers employed 300	
ddress (Street, city, state, and ZIP code) 00 Halket Street ittsburgh, Pa 15213 d. Employer Representative Edward McGinley, Jr., Corporate Employee Relations		e. Telephone No. 412-647-1710 Fax No. 412-647-6004	
Type of Establishment (factory, mine, wholesaler, etc.) g. Identify principal product or service Health Services		112 017-0001	
h. The above-named employer has engaged in and is en and (list subsections) unfair labor practices are practices affecting commerce commerce within the meaning of the Act and the Post	of the within the meaning of the Act, or these unfair labor	ne National Labor Relations Act, and these	
mutual aid and protection and in order to discoura reasons, the Employer has refused, and does now			
3. Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C)	e full name, including local name and number)		
(b) (6), (b) (7)(C)	e full name, including local name and number)	4b. Telephone No. (b) (6). (b) (7)(C) Fax No.	
4a. Address (Street and number, city, state, and ZIP code)		(b) (6), (b) (7)(C) Fax No.	

INTERNET

NATONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

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CB

DO NOT WRITE IN THIS SPACE

6-CA-35797

Date Filed 10-23-07

INSTRUCTIONS:

File an original and 4 Copies of this charge with NLRB Regional Director for the region in which the alleged unfair labor practice

1. EMPLOY	YER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer - Fresenius Medical Care North America		b. Number of Workers Employed believed to be over 1000
c. Address (street, city, State, ZIP. Code)	d. Employer Representative	a Telephone No (781) 699-9000
920 Winter St., Waltham, MA 02451	Elizabeth R. Sahatjian, Assistant General Counsel	Fax No.
L Type of Establishment (factory, mine, wholesaler, etc.) Health Care products/services provider	g. Identify Principal Product or Service Health Care products and services	

h The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of Section 8(a) subsections(1) and list subsections)

of the National labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the Act.

2. Basis of the Charge (setforth a clear and concise statement of the facts constituting the alleged unfair labor practices)

On or about [16,6,10] 2007, the above-named employer by its officers, agents, and representatives terminated the employment of (b) (6), (b) (7)(C) because engaged in concerted activities with other employees of said employer for the purpose of collective bargaining and other mutual aid and protection and in order to discourage said concerted activities. At all times since said date, and for the aforesaid reasons, the said employer has refused and does now refuse to employ the above-named employee.

By the above and other acts, the above-named employer has interfered with, restrained, and coerced employees in the exercise of the rights guaranteed in Section 7 of the Act

3. Full name of party filing charge (If labor organization, give full name, induding local name and number)

(b) (6), (b) (7)(C)

4a. Address (street and number, city, State, and ZIP Code)

4b, Telephone

b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

S. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)

6. DECLARATION

I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.

(b) (6), (b) (7)(C)

Fax No.

Address (b) (6), (b) (7)(C)

(telephone No.)(b) (6), (b) (7)(C

Date 10/22/07

UNITED STATE OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

-CA-35844

FORM EXEMPT UNDER 44 U.S.C 3512

DONOT WRITE IN THIS SPACE

Date Filed

// 11/16/2007

MOTOL	COT	-	un.
INSTRU		O	NS:

1 with NLRB Regional Director for the region in which the alleged File an original together with four copies and a copy for each additional charged

	1. EMPLOYER	AGAINST WHOM CHA	RGE IS BROUGHT	
. Name of Employer adon. Incorporated				b. Number of workers employed 50
c. Address (Street, city, state, a	nd 7IP code)	d. Employer Represer	ntative	e. Telephone No.
412 Main St.	in En doddy	Robert	ng	(724)947-3147
	D	Conroy		Fax No.
urgettstown	PA 15021-	Store Manager		() -
Type of Establishment(factory estaurant	, mine, wholesaler, etc.)	 g. Identify principal pro Fast Food Service 	oduct or service	
subsections)	ng commerce within the mea	ning of the Act, or these un	of the National L	section 8(a), subsections (1) and (list abor Relations Act, and these unfair labor unfair practices affecting commerce within
representatives, concerted activit and other mutua times since said	terminated the emploies with other emploid aid and protection a date and for the afor	above-named employment of, (b) (6), yees of said employed and in order to discoversaid reasons, the said reasons reasons, the said reasons	over, by its office (b) (7)(C)becau er for the purpose urage said conce	ers, agents and
refuse, to emplo	y the above-named e	employee.		
3. Full name of party filing charg			ame and number)	
B. Full name of party filing charge b) (6), (b) (7)(C) da. Address (Street and number b) (6), (b) (7)(C)	ge (if labor organization, give		ame and number)	4b. Telephone No. (b) (6), (b) (7)(C)
B. Full name of party filing charge b) (6), (b) (7)(C) A. Address (Street and number)	ge (if labor organization, give		ame and number)	
3. Full name of party filing charg b) (6), (b) (7)(C) da. Address (Street and number b) (6), (b) (7)(C)	ge (if labor organization, give ; city, state, and ZIP code)	full name, including local na		(b) (6), (b) (7)(C) Fax No.
B. Full name of party filing charges (b) (6), (b) (7)(C) Da Address (Street and number of (6), (b) (7)(C) D) (6), (b) (7)(C) D. Full name of national or intercorganization) (b) (6), (b) (7)(C) (c) (signature or represent or per	ge (if labor organization, give ; city, state, and ZIP code) national labor organization o	full name, including local name, including local name, including local name full name full name, including local name full name	nstituent unit (to be fille	(b) (6), (b) (7)(C) Fax No. () -
B. Full name of party filing charges (b) (6), (b) (7)(C) Ba. Address (Street and number of (6), (b) (7)(C) D) (6), (b) (7)(C) D. Full name of national or interpretation) (b) (6), (b) (7)(C) (c) (d) (e) (f) (c) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	ge (if labor organization, give ; city, state, and ZIP code) national labor organization or we read the above charge (6), (b) (7)(C)	full name, including local name, including local name, including local name full name full name, including local name full name	nstituent unit (to be fille are true to the best	(b) (6), (b) (7)(C) Fax No. () - ed in when charge is filed by a labor of my knowledge and belief. An Individual

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The rountine uses for the imformation are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATE F AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

0-4	Mr. Co	T FORM EXEMPT UNDER 44 U.S.C 3512
Q" , 24	TO DO TO	WRITE IN THIS SPACE
0	Øase 0 6-CA-35851	Date Filed 11–23–07

NETDI	ICTIONS:	

	RAGAINST WHOM CHARGE IS BROU	
a. Name of Employer Port Glenshaw Glass, LLC		b. Number of workers employed 100
c. Address (Street, city, state, and ZIP code)	d. Employer Representative	e. Telephone No.
1101William Flynn Highway	Dawn	(412)486-9100
Glenshaw PA 15116-	Dietz	Fax No.
f. Type of Establishment(factory, mine, wholesaler, etc.) factory	g. Identify principal product or service glass	
 The above-named employer has engaged in and is engag subsections) 		ing of section 8(a), subsections (1) and (list ional Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea the meaning of the Act and the Postal Reorganization Act	aning of the Act, or these unfair labor practice	
Basis of the Charge (set forth a clear and concise statement)	ent of the facts constituting the alleged unfair	r labor practices)
bargaining and other mutual aid and protection and in the aforesaid reasons, the said employer has refused, a		
3. Full name of party filing charge (if labor organization, give	a full name, including local name and numbe	ri
(b) (6), (b) (7)(C)	e full name, including local name and numbe	
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	e full name, including local name and numbe	4b. Telephone No. (b) (6), (b) (7)(C)
3. Full name of party filing charge (if labor organization, give (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	e full name, including local name and numbe	4b. Telephone No.
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	(5)(6)	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () -
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization) (b) (6), (b) (7)(C) ad the above charge of (7)(C)	(5)(6)	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - be filled in when charge is filed by a labor
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization) (b) (6), (b) (7)(C) 3d the above charge state and ZIP code)	of which it is an affiliate or constituent unit (to 6. DECLARATION a and that the statements are true to the	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () - be filled in when charge is filed by a labor be best of my knowledge and belief. an Individual

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case

FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE

6-CA-35853

Date Filed // 11-26-07

INSTRUCTIONS:

	R AGAINST WHOM CHARGE IS BROU	
Name of Employer Penn and Mary Trading Corp.		b Number of workers employed
c. Address (Street, city, state, and ZIP code)	d. Employer Representative	e. Telephone No.
9648 Old Route 126	Carol Ann	(814)735-3850
Warfordsburg PA 17267-	Decker	Fax No.
Type of Establishment(factory, mine, wholesaler, etc.) Truck Stop	Manager g. Identify principal product or service Fuel and groceries	(814)735-3841
h. The above-named employer has engaged in and is engaged subsections) practices are practices affecting commerce within the me the meaning of the Act and the Postal Reorganization Act	of the Nati	onal Labor Relations Act, and these unfair labor
engaged in concerted activities with		
bargaining and other mutual aid and activities. At all times since said date refused, and does now refuse, to em	protection and in order to discou e and for the aforesaid reasons,	the said employer has
bargaining and other mutual aid and activities. At all times since said dat refused, and does now refuse, to em	protection and in order to discou e and for the aforesaid reasons, i aploy the above-named employee	the said employer has
bargaining and other mutual aid and activities. At all times since said dat refused, and does now refuse, to em 3. Full name of party filing charge (if labor organization, give b) (6). (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	protection and in order to discou e and for the aforesaid reasons, i aploy the above-named employee	the said employer has
bargaining and other mutual aid and activities. At all times since said dat refused, and does now refuse, to em 3. Full name of party filing charge (if labor organization, given) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	protection and in order to discou e and for the aforesaid reasons, i aploy the above-named employee	the said employer has es. 4b. Telephone No.
bargaining and other mutual aid and activities. At all times since said data refused, and does now refuse, to em 3. Full name of party filing charge (if labor organization, given b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization)	protection and in order to discourse and for the aforesaid reasons, in ploy the above-named employed a full name, including local name and number	4b. Telephone No. (b) (6), (b) (7)(C) LENT MAX (Home) (b) (6), (b) (7)(C) be filled in when charge is filed by a labor best of my knowledge and belief. an Individual
bargaining and other mutual aid and activities. At all times since said data refused, and does now refuse, to em 3. Full name of party filing charge (if labor organization, give (b) (6), (b) (7)(c) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(c) 5. Full name of national or international labor organization organization)	protection and in order to discourse and for the aforesaid reasons, in ploy the above-named employed above-named employed afull name, including local name and number of which it is an affiliate or constituent unit (to 6. DECLARATION et and that the statements are true to the	4b. Telephone No. (b) (6), (b) (7)(C) East of my knowledge and belief.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

(b) (6), (b) (7)(C)

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-501

UNITED STATE OF AMERICA

AATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

Case Date Filed / / 12-4-07

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYE	R AGAINST WHOM CHARGE IS BROU	GHT
a Name of Employer Brothers Restaurant		b. Number of workers employed 9
c. Address (Street, city, state, and ZIP code) 3 N. Main Street Washington PA 15301-	d. Employer Representative Felix Maganotta	e. Telephone No. (724)223-0212 Fax No.
f. Type of Establishment(factory, mine, wholesaler, etc.) restaurant	g. Identify principal product or service	**************************************
h. The above-named employer has engaged in and is enga subsections) practices are practices affecting commerce within the me the meaning of the Act and the Postal Reorganization Act.	of the National of the Act, or these unfair labor practice	onal Labor Relations Act, and these unfair labor
employ the above-named employee		
employ the above-hamed employee		
3. Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C)		11
Full name of party filing charge (if labor organization, given).		4b. Telephone No. (b) (6), (b) (7)(C)
3. Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)		4b. Telephone No.
3. Full name of party filing charge (if labor organization, giv (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	e full name, including local name and number	4b. Telephone No. (b) (6), (b) (7)(C) Fax No. () -

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

(b) (6), (b) (7)(C)

INTERNET FORM NLRB-501 (6-07)

- UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case
6-CA-35888

Date Filed
12-10-07

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in Item 1 with NLRB Regional Director for the region in which the alleged

1, EMPLO	YER AGAINST WHOM CHARGE IS BROUGHT		
Name of Employer ANN TAYLOR LOFT		b. Number of workers employed 60	
Address (Street, city, state, and ZIP code) 20430 Route 19 Cranberry, PA 16066	d. Employer Representative Store Manager	e. Telephone No. 724/741-2100 Fax No.	
Type of Establishment (factory, mine, wholesaler, etc.) Retail Clothing Store	g. Identify principal product or service Women's Retail Clothing		
and (list subsections)	ce within the meaning of the Act, or these unfair labor pr	National Labor Relations Act, and the	
Full name of party filing charge (if labor organization, giv	ve full name, including local name and number)		
(b) (6), (b) (7)(C)		4b. Telephone No. (b) (6), (b) (7)(C) Fax No.	
(b) (6), (b) (7)(C) a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) Full name of national or international labor organization		(b) (6), (b) (7)(C) Fax No.	
a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C) 5. Full name of national or international labor organization organization) (b) (6), (b) (7)(C)	of which it is an affiliate or constituent unit (to be filled in 6. DECLARATION are and that the statements are true to the best of the statements are true to the best of the statements.	(b) (6), (b) (7)(C) Fax No. In when charge is filed by a labor	

UNITED STATED F AMERICA
NATIONAL LABOR RELATIONS BOARD WANTED
CHARGE AGAINST EMPLOYER
(WHICH)

-		FORM EXEMPT UNDER 44 U.S.C 3512
	NOT WRITE	IN THIS SPACE

Case Date Filed

6-CA-35894

12-12-07

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

infair labor practice occurred or is occurring. 1 FMPL OVE	R AGAINST WHOM CHARGE IS BROU	IGHT	
a Name of Employer	IN NOTING! WHOM OF MINGE TO BROS	b. Number of workers employed	
Linc Facility Services, LLC			
Tallet delity Sarries, ELEC			
c. Address (Street, city, state, and ZIP code)	d. Employer Representative	e. Telephone No.	
1201 Louisiana Street Suite 2700	Ed	(832)214-5512	
Houston TX 77002-	Delagarza Supervisor	Fax No. (832)325-5833	
f. Type of Establishment(factory, mine, wholesaler, etc.) Cleaning Service	g. Identify principal product or service	(032)323-3033	
h. The above-named employer has engaged in and is engaged subsections)	의 교통 나는 그 아들이 그렇게 되었다면 맛이 다른 사람들이 되는 것이 없다면 하셨다. 사	ing of section 8(a), subsections (1) and (list ional Labor Relations Act, and these unfair labor	
practices are practices affecting commerce within the me the meaning of the Act and the Postal Reorganization Ac	aning of the Act, or these unfair labor practice		
representatives terminated the empl activities with other employees of sa mutual aid and protection and in ord said date and for the aforesaid reaso employ the above-named employee.	old employer for the purpose of co er to discourage said concerted a ons, the said employer has refuse	ollective bargaining and other activities. At all times since	
3. Full name of party filing charge (if labor organization, give	e full name, including local name and number	ויי	
4a. Address (Street and number, city, state, and ZIP code)	,	4b. Telephone No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	
(b) (6), (b)	(b) (6)	Fax No. () -	
5. Full name of national or international labor organization organization)	of which it is an affiliate or constituent unit (to		
(b) (6). (b) (7) (C) see above charge	6. DECLARATION e and that the statements are true to the	best of my knowledge and belief.	
(signature of representative or person making charge)	(a) (a) (b) (b)	an Individual	
(b) (6), (b) (7)(C)	and the second of the second o	(Print/type name and title or office, if any)	
Address (i) (ii) (iii)	(fax) () - (b) (6) (b) (7)	1/100 07	
Audiges	(b) (6), (b) (7)	elephone No.) (date)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)